

SHARING THEIR STORIES

INTRODUCTION

In March 2006 a program titled, *Strengthening the Strengtheners: An Emergency Preparedness Conference for Faith Community Nurses/Health Ministries* was held in Olney, Maryland. The purpose of this conference, sponsored by the Montgomery County Department of Health and Human Services, Public Health Emergency Preparedness and Response Program, Advanced Practice Center (APC), was to engage faith communities in emergency preparedness especially for vulnerable populations. Faith communities have played a major role in responding to emergency events. During Katrina faith communities stepped forward and provided shelter, food, clothing, and other essential services to those who were displaced by the hurricane. Faith Community Nurses (FCNs), formerly known as parish nurses, are known and trusted individuals who work to promote health initiatives within their faith communities. The APC partnered with Adventist HealthCare and Holy Cross Hospital Faith Community Nursing Networks in planning the *Strengthening the Strengtheners* conference. Post-conference, six participants submitted proposals for a small stipend (\$50.00 gift card from one of three designated stores) to implement an emergency preparedness project in their faith communities. These six nurses were Ruth Manchester, MA, CRNI, FCN, RN, Odessa Battle-Nolan, MSN, RN, Marilee Tollefson, MSN, FCN, RN, Valeetah Motschieder, MS, RN, Beth Van Meter, MSN, FNP, and Susan Roach, BSN, FCN, RN. This article is about their projects, the strategies used, the challenges encountered and the projects' current status and outcomes.

PROJECTS, STATUS AND OUTCOMES

With a focus on emergency preparedness outreach to vulnerable congregation members identifying these individuals is the first step. Clergy, existing church ministries, and the general congregation are important sources for this essential information.

Ruth Manchester developed a questionnaire to survey personal emergency preparedness in the 2000 member **St. Luke Lutheran Church** congregation in Silver Spring, Maryland. She wrote an article for their publication, *Sharing*, on preparedness and what it means to be prepared. An existing "caring network" already know many elderly and homebound members. Manchester's survey and the network's information will identify those persons who may possibly need emergency assistance. Manchester will then use the "caring network" as a basis for creating an "emergency preparedness network". As parish nurse and Director of Caring Ministries at St. Luke's, she was well positioned to orchestrate the use of the "caring network" as a basis for creating "this emergency preparedness network". She has introduced the emergency preparedness concept in multiple meetings including a prayer partner meeting attended by 250

persons. Having identified 366 church members between the ages of 65 and 105 years of age, she is reviewing the list with the pastor and Social Ministry Committee to identify those who might need a contact person to assist during a public health emergency. The plan is to pair that individual with a church member who can assist in case of an emergency. The caring person's name, address and phone number will be placed in a magnetic picture frame to be kept on the individual's refrigerator for use when assistance is needed. Manchester is planning a follow-up effectiveness survey should such an event occur but as she says, "Even if a disaster never arises, it is good to know that everyone is connected in some way."

The senior members of the congregation of 300 at **Emory Grove United Methodist Church** in Gaithersburg, Maryland are already known. **Odessa Battle-Nolan** planned a seminar to raise awareness in the general congregation regarding the need for personal emergency preparedness. She is now asking congregation ministries to each sponsor three seniors to individualize outreach to that target population. The ministries will assist with developing emergency plans and assembling shelter-in-place emergency kits. Senior members and those with special needs did not attend the emergency preparedness seminar she presented to the general Emory Grove United Methodist faith community in June 2006. Even so, Battle-Nolan reports that those in attendance actively participated in the discussion regarding the need to be prepared. Her follow-up evaluation to measure the status of personal emergency plans and shelter-in-place emergency kits for those who did attend is pending. She also plans to measure the outcomes of congregation ministries who are each sponsoring three seniors looking at their effectiveness in assisting with developing emergency plans and assembling shelter-in-place emergency kits for these persons.

The **Lutheran Church of St. Andrew** has a congregation of 1500. The church is currently relocating from the Glenmont neighborhood to an upcounty location in the Cloverly area. With all that is involved is such a major move, **Marilee Tollefson** has written two articles for the church newsletter on emergency preparedness and is now focusing her project on the 25-30 elderly who have been pre-identified as unable to attend church or church activities. A pilot project to assemble and distribute shelter-in-place emergency kits for 2 to 3 of the frail elderly was developed. Currently her evaluation of the process of assembling and distributing these shelter-in-place emergency kits to the identified frail elderly in this faith community is pending. She plans on measuring the frail elders' understanding and the home visitors support of the project. She will expand emergency preparedness education to the general congregation once they are in their new location.

Valeetah Motschieder and Beth Van Meter are nurses who volunteer to serve the 1400 members of their **Spencerville Seventh-day Adventist Church** located in eastern Montgomery County. Their project addressed the need to educate the full congregation as well as to identify those who may be vulnerable in a public health emergency. Using input from the pastoral staff and the general congregation,

they identified 50 vulnerable persons including two isolated elderly. Motschieder and Van Meter prepared a display of items in a Plan 9 Kit that was set up in the church foyer in June 2006. At that time they showed a Hurricane Isabel video (not Hurricane Katrina as many guessed) to dramatize the need for local preparation. Handouts were given listing suggested items and web sites for additional information. A “Do You Know about Plan 9?” is the title of their most recent article in the church newsletter, *Spencerville Spirit*. The foyer display will be repeated in March 2007. Future plans include contacting the most vulnerable persons to determine if their resource needs have been met.

Susan Roach targeted 20 church staff and those involved in congregational caring ministries at **Metropolitan Memorial United Methodist Church** in the District of Columbia to begin her project. This focus established the foundation for an emergency preparedness ministry that can serve the congregation. A database by zip code of older persons, persons with special needs, and of the entire congregation is being created. Within the framework of the church’s Wellness Committee, meetings have taken place with 15 of the 20 identified church staff and congregational ministry leaders to begin their emergency preparedness training. Unfortunately the multiple activity presentations at the September 2006 Open House detracted from the emergency preparedness project. Consequently, articles in *The Messenger*, titled “Are You Ready” and “Be Safe in an Emergency” set the stage for the January Emergency Preparedness (EP) Campaign. This Emergency Preparedness (EP) Campaign included hosting a coffee hour to publicize “EP”, a speaker on “Pandemic Flu/Avian Flu” and at the end of the month a speaker on “Practical Steps in EP.” The next phase will focus on assembling kits for special populations. This will be an intergenerational activity with the youth putting the Plan 9 Kits together.

SUMMARY

These Faith Community Nurses (FCNs) in advancing their five emergency preparedness projects assessed their congregations’ strengths and challenges and then developed their strategies and interventions. Their stories shared here occurred over only nine months. Emergency preparedness is an incremental process. These activities will be ongoing in these faith communities. A question to ask is, “What are you doing in your own faith community?” Is your faith community prepared? In partnership with faith community nurses/health ministries we can keep moving forward to implement this message of preparedness in all faith communities. For more information or questions, please contact the Public Health Emergency Preparedness and Response Program at 240-777-3038.